24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼		
Our Principles PAC			
	C C00603621		
Check if X 24-hour report 48-hour report New report Amends report filed on			
Full Name of Payee	Date of Public Distribution/Dissemination		
DDC Advocacy	M M / D D / Y Y Y Y		
Mailing Address 805 15th Street, N.W.	03 29 2016 Amount		
Suite 300			
City State Zip Code	136812.60		
Washington DC 20005	Transaction ID: SE.5300 Date of Disbursement or Obligation		
Purpose of Expenditure Direct mail services Category/ Type	M = M / D = D / Y = Y = Y		
Name of Federal Candidate Support Office	e Sought: House District:		
Donald J. Trump Oppose	President Senate State: WI		
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	orsement For:		
Full Name of Payee	Date of Public Distribution/Dissemination		
DDC Advocacy	03 29 2016		
Mailing Address 805 15th Street, N.W.			
Suite 300	Amount		
City State Zip Code	10896.48		
Washington DC 20005	Transaction ID : SE.5302 Date of Disbursement or Obligation		
Purpose of Expenditure Category/	M M / D D / Y Y Y Y Y		
Voter contact-telephone calls Type			
Name of Federal Candidate Support Office	e Sought: House District:		
Donald J. Trump Oppose	President Senate State: WI		
2016	ursement For: Primary General		
Per Election for Office Sought 0.00 2016	Other (specify)		
(a) SUBTOTAL of Itemized Independent Expenditures	147709.08		
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Jamie Jodoin [Electronically Filed] Date 0	3 30 2016		
Signature			

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)		PAGE 2 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Our Principles PAC		C C00603621
Check if X 24-hour report 48-hour report X New report A	mends report filed on	M / D D / Y Y Y Y Y
Full Name of Payee TargetPoint Consulting, Inc.	M	of Public Distribution/Dissemination
Mailing Address 66 Canal Center Plaza, #555	Amour	03 30 2016 nt
City State Zip Code		68660.00
Alexandria VA 22314		action ID : SE.5304 of Disbursement or Obligation
Purpose of Expenditure Research Category Type		M / D D / Y Y Y Y
Name of Federal Candidate	Support Office Sought	t: House District:
Donald J. Trump	Oppose Preside	ent Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 0.0	Disbursement 2016 Ot	t For:
Full Name of Payee	Date o	of Public Distribution/Dissemination
Ma Trans Addition		"M / D D / Y Y Y Y
Mailing Address	Amour	nt
City State Zip Code	L.	
	Date of	of Disbursement or Obligation
Purpose of Expenditure Category		M / D D / Y Y Y Y Y
Name of Federal Candidate	Support Office Sought	t: House District:
	Oppose Preside	ent Senate State:
Calendar Year-To-Date Per Election for Office Sought	Disbursement	t For:
(a) SUBTOTAL of Itemized Independent Expenditures	······	68660.00
(b) SUBTOTAL of Unitemized Independent Expenditures		4 1 4 1 4 1
(c) TOTAL Independent Expenditures	······	216369.08
Under penalty of perjury I certify that the independent expenditures reported h with, or at the request or suggestion of, any candidate or authorized committee party committee) any political party committee or its agent.		
Jamie Jodoin [Electronically Filed]	Date 03	30 / 2016
Signature		